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                                                          SENATE FILE 512
                                       AN ACT
  4 RELATING TO THE REGULATION OF PHARMACY BENEFITS MANAGERS AND
         MAKING PENALTIES APPLICABLE, AND PROVIDING AN EFFECTIVE DATE.
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   7 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:
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         Section 1. <u>NEW SECTION</u>. 510B.1 DEFINITIONS.
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         As used in this chapter, unless the context otherwise
1 10
  11 requires:
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              "Commissioner" means the commissioner of insurance.
         1.
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              "Covered entity" means a nonprofit hospital or medical
1 14 services corporation, health insurer, health benefit plan, or
1 15 health maintenance organization; a health program administered 1 16 by a department or the state in the capacity of provider of
1 17 health coverage; or an employer, labor union, or other group
1 18 of persons organized in the state that provides health
1 19 coverage. "Covered entity" does not include a self=funded 1 20 health coverage plan that is exempt from state regulation
1 21 pursuant to the federal Employee Retirement Income Security
  22 Act of 1974 (ERISA), as codified at 29 U.S.C. } 1001 et seq., 23 a plan issued for health coverage for federal employees, or a
1 24 health plan that provides coverage only for accidental injury,
  25 specified disease, hospital indemnity, Medicare supplemental, 26 disability income, or long=term care, or other limited benefit
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1 27 health insurance policy or contract.
         3. "Covered individual" means a member, participant,
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1 29 enrollee, contract holder, policyholder, or beneficiary of a 1 30 covered entity who is provided health coverage by the covered
1 31 entity, and includes a dependent or other person provided
  32 health coverage through a policy, contract, or plan for a
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  33 covered individual.
        4. "Generic drug" means a chemically equivalent copy of a
  35 brand=name drug with an expired patent.

1 5. "Labeler" means a person that receives prescription
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   2 drugs from a manufacturer or wholesaler and repackages those
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   3 drugs for later retail sale and that has a labeler code from
   4 the federal food and drug administration pursuant to 21 C.F.R.
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   5 } 207.20.
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         6.
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             "Pharmacy" means pharmacy as defined in section 155A.3.
   7. "Pharmacy benefits management" means the administration 8 or management of prescription drug benefits provided by a
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   9 covered entity under the terms and conditions of the contract
 10 between the pharmacy benefits manager and the covered entity.
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             "Pharmacy benefits manager" means a person who performs
2 12 pharmacy benefits management services. "Pharmacy benefits 2 13 manager" includes a person acting on behalf of a pharmacy
  14 benefits manager in a contractual or employment relationship
2 15 in the performance of pharmacy benefits management services
2 16 for a covered entity.
                                 "Pharmacy benefits manager" does not
  17 include a health insurer licensed in the state if the health
2 18 insurer or its subsidiary is providing pharmacy benefits
2 19 management services exclusively to its own insureds, or a
2 20 public self=funded pool or a private single employer
2 21 self=funded plan that provides such benefits or services 2 22 directly to its beneficiaries.
2 23
         9.
              "Prescription drug" means prescription drug as defined
  24 in section 155A.3.
         10. "Prescription drug order" means prescription drug
  25
2 26 order as defined in section 155A.3.
  27 Sec. 2. <u>NEW SECTION</u>. 510B.2 C
28 THIRD=PARTY ADMINISTRATOR REQUIRED.
                                             CERTIFICATION AS A
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        A pharmacy benefits manager doing business in this state
  30 shall obtain a certificate as a third=party administrator
  31 under chapter 510, and the provisions relating to a
  32 third-party administrator pursuant to chapter 510 shall apply
  33 to a pharmacy benefits manager.
         Sec. 3. <u>NEW SECTION</u>. 510B.3 ENFORCEMENT == RULES.
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         1.
              The commissioner shall enforce the provisions of this
   1 chapter.
         2. The commissioner shall adopt rules pursuant to chapter
   3 17A to administer this chapter including rules relating to all
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a. Timely payment of pharmacy claims.

A process for adjudication of complaints and settlement of disputes between a pharmacy benefits manager and a licensed 8 pharmacy related to pharmacy auditing practices, termination 9 of pharmacy agreements, and timely payment of pharmacy claims.
10 Sec. 4. NEW SECTION. 510B.4 PERFORMANCE OF DUTIES ==

3 10 Sec. 4. <u>NEW SECTION</u>. 510B.4 P 3 11 GOOD FAITH == CONFLICT OF INTEREST.

- 1. A pharmacy benefits manager shall perform the pharmacy 3 13 benefits manager's duties exercising good faith and fair 3 14 dealing in the performance of its contractual obligations 3 15 toward the covered entity.
- 2. A pharmacy benefits manager shall notify the covered 3 17 entity in writing of any activity, policy, practice ownership 3 18 interest, or affiliation of the pharmacy benefits manager that 3 19 presents any conflict of interest.

Sec. 5. <u>NEW SECTION</u>. 510B.5 CONTACTING COVERED 3 21 INDIVIDUAL == REQUIREMENTS.

A pharmacy benefits manager, unless authorized pursuant to 3 23 the terms of its contract with a covered entity, shall not 3 24 contact any covered individual without the express written 3 25 permission of the covered entity.

26 Sec. 6. <u>NEW SECTION</u>. 510B.6 DISP 27 PRESCRIPTION DRUG FOR PRESCRIBED DRUG. DISPENSING OF SUBSTITUTE

- 1. The following provisions shall apply when a pharmacy 3 29 benefits manager requests the dispensing of a substitute 30 prescription drug for a prescribed drug to a covered 31 individual:
- a. The pharmacy benefits manager may request the 3 33 substitution of a lower priced generic and therapeutically 34 equivalent drug for a higher priced prescribed drug.
 - If the substitute drug's net cost to the covered individual or covered entity exceeds the cost of the 2 prescribed drug, the substitution shall be made only for 3 medical reasons that benefit the covered individual.
 - 2. A pharmacy benefits manager shall obtain the approval 5 of the prescribing practitioner prior to requesting any 6 substitution under this section.
 - 3. A pharmacy benefits manager shall not substitute an 8 equivalent prescription drug contrary to a prescription drug order that prohibits a substitution.
 - Sec. 7. NEW SECTION. 510B.7 DUTIES TO PHARMACY NETWORK PROVIDERS.
- 1. A pharmacy benefits manager shall not mandate basic 4 13 recordkeeping that is more stringent than that required by 4 14 state or federal law or regulation.
- 2. If a pharmacy benefits manager receives notice from a 16 covered entity of termination of the covered entity's 4 17 contract, the pharmacy benefits manager shall notify, within 4 18 ten working days of the notice, all pharmacy network providers 4 19 of the effective date of the termination.
- Within three business days of a price increase 4 21 notification by a manufacturer or supplier, a pharmacy 4 22 benefits manager shall adjust its payment to the pharmacy 4 23 network provider consistent with the price increase.
- Sec. 8. PHARMACY BENEFITS MANAGER LEGISLATIVE INTERIM The legislative council is requested to establish 4 25 COMMITTEE. 4 26 a legislative interim committee on pharmacy benefits managers 4 27 to review all of the following:
- 1. Transparency and disclosure arrangements between 4 29 pharmacy benefits managers and covered entities.
- 2. Confidentiality protections for information disclosed 4 31 to covered entities and remedies for unauthorized disclosure.
 - 3. The ability of covered entities to audit pharmacy 33 benefits managers.
 - 4. Appropriate remedies for covered entities to enforce a 35 provision of or for violation of a provision of chapter 510B, as enacted in this Act.
 - EFFECTIVE DATE == DIRECTIVE TO COMMISSIONER OF Sec. 9. INSURANCE.
 - This Act takes effect January 1, 2008. 1.
 - Notwithstanding the effective date of this Act, the 6 commissioner of insurance shall commence the process of developing proposed rules to implement and administer this Act 8 beginning July 1, 2007.

5 5 5	15 16 17 18 19	PATRICK J. MURPHY Speaker of the House
5	20 21	I hereby certify that this bill originated in the Senate and is known as Senate File 512, Eighty=second General Assembly.
5	22 23 24 25	MICHAEL E. MARSHALL
5 5 5	26 27 28 29 30	Approved, 2007
5	31 32	CHESTER J. CULVER Governor